191665 2008.42.T

State Of South Carolina

Re: Compliance Review Requested

Name of Motor Carrier LOW COUNTRY EXCURSIONS LIC

Action 7	Taken:		
	Referred for a Compliance Review		
	Date:		
	Investigator:	<u> </u>	
Complia	nce Review Findings:		
	Satisfactory		
·	Unsatisfactory		

LICIL. TELM W HANF? Compliance Réview Officers

South Carolina State Transport Police



US DOT# 00000000

Legal: LOW COUNTRY EXCURSIONS LLC Operating (DBA): WHITE TIE LIMOUSINE

MC/MX #:

Scope:

Federal Tax ID:

Review Type: Compliance Review (CR)

Cargo Tank:

Principal Office

Location of Review/Audit: Company facility in the U. S.

Territory:

Operation Types Interstate Intrastate

> Carrier: N/A

N/A

Non-HM **Business:** Corporation

N/A N/A Shipper:

Gross Revenue: \$125,000.00

for year ending: 12/31/2007

Company Physical Address:

1489 River Road

Johns Island, SC 29455

Contact Name:

Beth Strickland

Phone numbers: (1) 843-437-5152

(2)

Fax 843-559-5047

E-Mail Address:

beth@lowcountryexcursions.com

Company Mailing Address:

1489 River Road

Johns Island, SC 29413

Carrier Classification

Other: not author

Cargo Classification

Passengers

Does carrier transport placardable quantities of HM? No

Intra

is an HM Permit required?

N/A

Driver Information

Inter

Average trip leased drivers/month: 0

< 100 Miles:

Total Drivers: 1

>= 100 Miles: 1 CDL Drivers: 1

Equipment

Owned Term Leased Trip Leased Owned Term Leased Trip Leased Van, 9-15 0 ō Limousine, 1-8 0 2 0 Limousine, 16+

Power units used in the U.S.: 4

Percentage of time used in the U.S.: 100



U.S. DOT #: 00000000

Review Date: 04/01/2008

Part A

QUESTIONS regarding this report or the Federal Motor Carrier Safety or Hazardous Materials rules may be addressed to the Office of Motor Carriers at:

South Carolina State Transport Police, Motor Carrier Compliance Unit 10322 Wilson Blvd., Building D-2, PO Box 1993 Blythewood, SC 29016

This report will be used to assess your safety compliance.

Person(s) Interviewed

Name: Beth Strickland

Title: Vice President

Name:

Title:





U.S. DOT #: 00000000

Review Date: 04/01/2008

Part B Violations

1 FEDERAL	Primary: 382.601(b)		Discovered	Checked 1	Drivers/Ve In Violation	
Example Driver - Dougl	as Crall - Trip Date -03/	tten policy on misuse of al			entiative and sul	ostance
abuse profess 2 FEDERAL	Primary: 383.35(b)	te of receipt.	Discovered	Checked 1	Drivers/Volation	
Example	uest employment history	y information for the 10 year	ars preceding the date of	the application	on for employme	ent.
3 FEDERAL	Primary: 390.21(b)(Discovered 2	Checked 2	Drivers/V In Violation 2	
Example		vehicle with the legal name Number - BC 3229 - Trip D	•			
4 FEDERAL	Primary: 396.3(b)(1)	Discovered 2	Checked 2	Drivers/V In Violation 2	
Example		d which identifies the vehic s missing year, make, seri	•	ıl number, yea	ır, and tire size.	
5 FEDERAL	Primary: 396.19(b)		Discovered	Checked 1	Drivers/V In Violation 2	
Example	intain evidence of inspe	ector's qualifications.	/2008 - Trip Date - 03/24	/2008.		
Safety Fitness Rating Information: Total Miles Operated 32,000 Recordable Accidents 0			OOS Vehicle (CR): 0 Number of Vehicle Inspected (CR): 2 OOS Vehicle (MCMIS): 0 Number of Vehicles Inspected (MCMIS): 0			



U.S. DOT#: 00000000

Review Date: 04/01/2008

Part B Violations

Your proposed safety rating is :

This Review is not Rated.





U.S. DOT #: 00000000

Review Date: 04/01/2008

Part B Requirements and/or Recommendations

- Copies of the regulations, forms, interpretations, and manuals are available from a variety of sources. Check the FMCSA website for a current list of suppliers. www.fmcsa.dot.gov/safety-security/eta/index.htm
- 2. Conduct periodic internal reviews of your driver qualification, hours of service control, maintenance, accident analysis/reporting, training, and other safety systems to ensure continued compliance with the FMCSR.
- 3. Review the circumstances under which a CDL is required. CDL and drug testing rules apply to both interstate and intrastate commerce.
- 4. Maintain all required controlled substance testing records including yearly summaries, quarterly summaries, test information, test results, records of training etc., as required by 49 CFR Parts 40 and 382 of the FMCSR.
- 5. If you want some drivers to use the 100 air-mile radius exemption, make sure that the drivers meet all terms of the exemption, including being released from duty no more than 12 hours from when they report for duty. Logs must be prepared if a driver does not meet the 12 hour requirement.
- **6.** Establish a systematic maintenance records program for all vehicles. Maintain a complete file for each subject vehicle, recording all repair, maintenance and inspection operations performed.
- 7. Require all drivers to prepare a written inspection report for each day a vehicle is operated. Ensure that each report is signed by the driver, certified, and reviewed if defects are reported, then kept in the vehicle for a day.
- 8. Keep all driver vehicle inspection reports, signed, certified, and reviewed as required on file for at least 90 days.
- 9. A complete Educational and Technical Assistance package entitled "A MOTOR CARRIER'S GUIDE TO IMPROVING HIGHWAY SAFETY" is available free on the FMCSA website to assist you in complying with the safety regulations. It contains many forms and documents useful for improving the safety of your operations. Check: www.fmcsa.dot.gov/factsfigs/eta/index.html.
- 10. Within 15 days, send a letter to the South Carolina State Transport Police describing what actions you have taken in response to this review to ensure that you are complying with the Federal Motor Carrier Safety Regulations. ATTN: L/cpl. Terry W. Harvey

South Carolina State Transport Police

US DOT# 00000000

Legal: LOW COUNTRY EXCURSIONS LLC Operating (DBA): WHITE TIE LIMOUSINE

MC/MX #:

Scope:

Federal Tax ID

Review Type: Compliance Review (CR) - Receipt

Operation Types

Principal Office

Location of Review/Audit: Company facility in the U.S.

Territory:

Interstate Intrastate

Cargo Tank:

Shipper:

N/A Carrier:

Non-HM

N/A

N/A

N/A

Gross Revenue: \$125,000.00

Business: Corporation

for year ending: 12/31/2007

Company Physical Address:

1489 River Road

Johns Island, SC 29455

Contact Name:

Beth Strickland

Phone numbers: (1) 843-437-5152

Fax 843-559-5047

E-Mail Address:

beth@lowcountryexcursions.com

(2)

Company Mailing Address:

1489 River Road

Johns Island, SC 29413

Report Summary

Report	# of Pages
Part A - General	2
Part B - Violations	2
Part B - Recommendations	1
Review/Audit Receipt Page	1
Total Pages	6

Disclaimer: By signing below, I acknowledge that I have received a copy of this review/audit and agree with the total number of pages indicated (above) for each document. My signature does not imply agreement with the findings of the review/audit, however they have been discussed in detail with me.

QUESTIONS regarding this report or the Federal Motor Carrier Safety or Hazardous Materials rules may be addressed to the Office of Motor Carriers at:

> South Carolina State Transport Police, Motor Carrier Compliance Unit 10322 Wilson Blvd., Building D-2, PO Box 1993 Blythewood, SC 29016

> > This report will be used to assess your safety compliance.

Person(s) Interviewed

Name: Beth Strickland

Title: Vice President

Name:

Title:

Reported By: Jeny V Han

Title:

Code: SC0036

Date: 4/1/2008

Received By:

5/1

Title:



State Transport Police PO Box 1993 http://www.scdps.org

Blythewood, SC 29016

Phone: (803)896-5500 Fax: (803)896-5526

DRIVER/VEHICLE EXAMINATION REPORT

Report Number: SCTH36000515 Inspection Date: 03/26/2008

Start Time: 10:17 AM End Time: 10:40 AM

Insp. Level: V-Terminal, No HM Insp.

.OW	COUNTRY	EXCURSIONS	LLC
1400	DIVIED DO	A P.	

1489 RIVER ROAD

JOHNS ISLAND, SC 29413

USDOT#:

Phone#: (843)437-5152

MC/MX#: State#:

Highway:

Location: 019

Fax#: (843)559-5047

MilePost:

Origin: Destination: **Driver:**

License#:

Date of Birth:

CoDriver: License#:

State:

State:

Date of Birth:

Shipper:

Bill of Lading:

Cargo: L - PASSENGERS

County: CHARLESTON, SC VEHICLE IDENTIFICATION

Unit Type Make Year State

SC BU OTHR 2006

2

N/A

N/A

HYDR

License # BC3228

Company #

Vin # 5N3AA08A26N800862 **GVWR**

Placard: No

CVSA#

005#

BRAKE ADJUSTMENTS

HYDR

Axle # 1 N/A Right Left N/A

VIOLATIONS

Chamber

Section Code Type Unit OOS Citation # Verify Crash Violations Discovered

Not marked in accordance with regulations (Name) 390.21(a) Ν Ν Ν No/discharged/unsecured fire extinguisher(Not Secured) 393.95(a) Ν

HazMat: No HM Transported.

Special Checks: No Data for Special Checks.

Cargo Tank:

CARRIER CERTIFICATION: The undersigned certifies that all violations on this report have been corrected and action has been taken to assure compliance with the Federal Motor Carrier Safety and Hazardous Material Regulations insofar as they are applicable to motor carriers and drivers. This certification MUST BE SIGNED by the Motor Carrier and RETURNED WITHIN 15 days to the: South Carolina State Transport Police, P.O. Box 1993, Blythewood, South Carolina 29016.

Signature Of Motor Carrier X:

Signature Of Repairer X:

Report Prepared By: TW HARVEY

Badge #:



x Iw Have

Copy Received By: Sith Stithland



State Transport Police PO Box 1993

http://www.scdps.org Blythewood, SC 29016

Phone: (803)896-5500 Fax: (803)896-5526

DRIVER/VEHICLE EXAMINATION REPORT

Report Number: SCTH36000514 Inspection Date: 03/26/2008

Start Time: 08:44 AM End Time: 10:17 AM

Insp. Level: V-Terminal, No HM Insp.

LOW COUNTRY EXCURSIONS LLC

1489 RIVER ROAD

JOHNS ISLAND, SC 29413

USDOT#: MC/MX#:

Phone#: (843)437-5152

State#:

Location: 019

Highway:

County: CHARLESTON, SC

Fax#: (843)559-5047

MilePost:

Origin: Destination: **Driver:**

License#:

Date of Birth:

CoDriver:

License#:

Date of Birth: Shipper:

Bill of Lading:

Cargo: L - PASSENGERS

Placard: No

VEHICLE IDENTIFICATION

Unit Type Make BU

Year OTHR 2003

State SC

License # BC3229

Company #

Vin#

GVWR 5GRGN23U03H131797 14,000

CVSA#

OOS#

State:

State:

BRAKE ADJUSTMENTS

Axle # Right

1 N/A N/A N/A

Left N/A HYDR Chamber **HYDR**

VIOLATIONS

Section Code Type Unit OOS Citation # Verify Crash Violations Discovered

390.21(a) Ν 393.95(a)

Ν Ν

N

Not marked in accordance with regulations (Name) No/discharged/unsecured fire extinguisher (Not Secured)

HazMat: No HM Transported.

Special Checks: No Data for Special Checks.

Signature Of Repairer X:

Facility:

Cargo Tank:

CARRIER CERTIFICATION: The undersigned certifies that all violations on this report have been corrected and action has been taken to assure compliance with the Federal Motor Carrier Safety and Hazardous Material Regulations insofar as they are applicable to motor carriers and drivers. This certification MUST BE SIGNED by the Motor Carrier and RETURNED WITHIN 15 days to the: South Carolina State Transport Police, P.O. Box 1993, Blythewood, South Carolina 29016.

Signature Of Motor Carrier X:

Date

Report Prepared By: TW HARVEY

Badge #:

Copy Received By:

Tw Harr

en Stricklan



U.S. DOT #: 00000000

Review Date: 04/01/2008

Part C

Reason for Review: Company Request
Planned Action: Compliance Monitoring

Safestat Category:

Parts Reviewed Certification:

180 177 178 382 383 387 390 391 392 393 395 396 397 398 399 171 172 173

 $\checkmark \quad \checkmark \quad \checkmark \quad \checkmark \quad \checkmark \quad \checkmark$

Prior Reviews

Prior Prosecutions

Unsat/Unfit Information

Is the motor carrier of passengers subject to the safety fitness procedures contained in 49 CFR part 385 subpart A, AND does it transport passengers in a commercial motor vehicle?

Yes - Intrastate

Does carrier transport placardable quantities of hazardous materials?

Unsat/Unfit rule: Not Applicable

Corporate Contact: Beth Strickland

Special Study Information:

Corporate Contact Title: Vice President

Remarks:

This investigation was initiated because the carrier had applied to the South Carolina Public Service Commission for a Class C

Charter Bus Certificate. This certificate requires that the carrier be in compliance with the Federal Motor Carrier Safety Regulations as adopted by South Carolina. This carrier has 4 limousines, one, 1 -8, one, 9 -15, and two, 16 or more. Personnel present during the review were Beth Strickland, Vice President. All records were kept at her residence and were provided by her within 48 hours. Carrier has her intrastate authority for the 1 -8, and 9 - 15 and was applying for her authority for the two 16 or more limousines. All vehicles are term leased. Carrier's gross income for calender year 2007 was \$125,000. Beth Strickland is involved in the day to day operations. Carrier had 0 accidents in last 12 months.

In Part 40, no violations found.

In Part 382, carrier's company policy was incomplete.

In Part 383, carrier failed to request employment history for prior ten years.

In Part 387, no violations were found.

In Part 390, carrier failed to have name on the two 16 or more vehicles.

In Part 393, two inspections were done with no OOS violations.

In Part 395, no violations found.

In Part 396, carrier had maintenance files, but did not have file identifying vehicle. Carrier failed to have evidence of inspector's certification.

Mrs. Strickland was very cooperative and stated she would correct all violations immediately.



U.S. DOT #: 00000000

Review Date: 04/01/2008

Part C

Upload Authorized:

Yes

No

Authorized by:

Yes

Date: No

Failure Code:

Uploaded: Verified by:

Date:

